

PLANNING & TRANSPORTATION

P.O. BOX 905 1048 Carriage Oaks Drive Carthage, NC 28327 Inspections/Permitting: (910) 947-2221 Planning: (910) 947-5010 Transportation: (910) 947-3389 Fax: (910) 947-1303



CO-LOCATED WIRELESS COMMUNICATION FACILITES (WCF) APPLICATION

□ CO-LOCATION APPLICATION FEE ENCLOSED (\$500.00)

Applicant information				
	Contact Nam			
Address:	City:	State:	_ Zip:	
Office Phone:	Cell Phone:	Fax:		
Email:				
Applicant Classification: □ Con	nmercial Wireless Provider Govern	mental User Private Busine	ess User	
Is this a joint application by two	or more wireless service providers?	□ YES □ NO		
If this is a joint application, plea	se attach contact information for each	additional applicant.		
Daniel Information				
Parcel Information ParID #:	Zoning District:			
Address:		State:		
Address	City	State	_ Zip	
Landowner Information				
	Pho	one:		
Address:	City:	State:	Zip:	
WCF Owner Information				
	Contact Nan	na.		
	City: Cell Phone:		_	
		Tax		
Email:				
WCF Facility Information				
Street Address:	City:	State:	Zip:	
	Longitude:		_	
	Ground elevation (A			
**	Monopole □ Rooftop □ Self Suppo			
• •	(AGL): Add	-		
Treight of proposed to focution ((10L) 11dd	intolar co locations available		
Current Co-Locations (Please	identify owners, and heights, of all other	her co-locations that are on th	e support structure.)	
	•			
	Height: Height:			
	Height:			
		Height:		
	Height:			
Co-location 6: Name:		ght:		
CO-location of Name.	пеі	g.,		

	escribe the extent of the modification(s) including but not limited to any ze changes, ground work, generators, electrical work, signage, etc.:	replacements, upgrades, height changes,
_		
Pl	ease check each item per the Moore County Unified Development Ordin	nance Section 8.99(B):
	Site Plan. Drawing in accordance with Section 4.2.C	
	Radio Frequency. A statement from a registered engineer that the WCF we with all applicable Federal Communications Commission (FCC) rules interference and if there is interference with public safety communication forth by the FCC and the party causing the interference shall reimburs resolving the interference.	regarding radio frequency emissions and ns, the applicant shall utilize procedures set
	<u>Structural Analysis</u> . Signed and sealed by a NC Registered Professional completion of the applicant's installation has the structural integrity to complies with all applicable Federal and State building, fire, structural, electrical complex complex in the structural complex co	accommodate the proposed equipment and
	Lighting. Applicant shall provide documentation that lighting shall not of (FAA) minimum standards (minimum intensity and longest duration downward shielding to minimize visual impact to pedestrians and reduce Strobe lights during daylight hours and red lights during nighttime hours of WCF may utilize a security light controlled by a motion-detector sensor at	between flashes) and shall utilize allowed the potential attraction to migratory birds. unless specifically prohibited by the FAA. A
	Owner Authorization. Proof that a property and/or antenna support	structure owner's agent has appropriate
	authorization to act upon the owner's behalf if applicable. <u>Insurance.</u> Proof of certificates of insurance of general liability insuraceovering any liability arising out of its construction or operation of the WO	
	Bond. Applicant shall submit a performance bond or letter of credit from or a bond equal to the written estimate from a qualified tower removal coremoved when no longer in use. Collocation applicants shall provide even the WCF bond, or shall provide a new performance bond equal to the write contractor to remove their equipment, cabinets, antenna, feed wires a applicant's ownership/lease upon applicant's cessation of use.	ntractor to guarantee that the facility will be idence that the collocation is covered under the estimate from a qualified tower removal
	US Fish and Wildlife Service submitted information, if applicable.	□ Yes □ No
	National Environmental Policy Act (NEPA) checklist, if applicable.	
	State Historic Preservation Office (SHPO) letter, if applicable.	□ Yes □ No
	Federal Aviation Administration (FAA) approval, if applicable.	□ Yes □ No
	ENDORSEMENT	
co	ne applicant certifies that all statements, certifications, and representation rrect and that the person signing this application is duly authorized to execute applicant's behalf with respect thereto:	
Pr	inted name: Dated this	day of, 20
Si	gnature Title:	